

## **Employment Application**

## 5200 Springfield Street, Suite 100, Riverside, OH 45431 www.riverside.oh.us

The City of Riverside is an Equal Opportunity Employer. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

PLEASE PRINT

Position (s) Applied For:	Date of Application:				
Police	Fire		Service		Administration
Personal Information					
Type of employment desired	Volunteer	Full-Time		Part-Time	Seasonal
Name:					
(Last)	(	(First)		(Middle)	
Address:					
(Street and/or P.O. Box)					
(City)	(:	State)		(Zip Code)	
Telephone Number(s):					
(Home)		(Work)		<b>.</b> .	(Other)
Driver's License Number:		Class		State _	
Are you at least 18 years of age?			yes		no
Police Applicants only: Are you at leas	t 21 years old?		yes		no
Are you OPOT	A certified?		yes		no
Have you ever been employed by the C	ity of Riverside?		yes		no
If yes, give department and	date				
Do you have any relatives employed by If yes, who and what departs	-	for?	yes		no
Are you legally eligible for employment	in the United State	s?	yes		no
Date available for work:/					
Are you currently employed?			yes		no
If yes, may we contact your	employer?		yes		no

Please be advised that you may be disqualified from employment in certain positions with the City of Riverside if the result of the criminal background check reveals a particular criminal history.

## Employment Experience (professional resume can substitute the following information)

Start with your current or most recent job. Attach additional pages if necessary. All sections must be completed.

Please describe the duties you have performed which demonstrate the knowledge, skills and abilitiies to perform the duties of which you are applying. Employer Dates Employed (MM/YYYY) From То Address (Street, City, State, Zip) Starting Salary **Ending Salary** Telephone Number Job Title Supervisor Duties and Responsibilities: Reason for leaving: Dates Employed (MM/YYYY) Employer From Address (Street, City, State, Zip) Starting Salary **Ending Salary** Telephone Number Job Title Supervisor Duties and Responsibilities: Reason for leaving: Employer Dates Employed (MM/YYYY) From То Address (Street, City, State, Zip) Starting Salary **Ending Salary** Telephone Number Job Title Supervisor Duties and Responsibilities: Reason for leaving:

Education						
Do you have a high school diploma, GED Certificate or equivalent?						
College	City, State	Course of Study	Years Completed	Degree		
Graduate School	City, State	Course of Study	Years Completed	Degree		
Other (please specify military, business, trade)	City, State	Course of Study	Years Completed	Degree or Certificate Earned		
Training and Other Qualif	ications		_			
Please list any training which you have	ve received which may be relevan	t to the city position for w	nich you are ap	plying.		
Additional Information						
Specialized Skills: Check any of the following that you are proficient in						
Computer Software		Ohio Peace Officer Certified				
Office Equipment		CDL				
Heavy Equipment			☐ Typing	wpm		
EMS: Certification #	Level:					
FIRE: Certification #	Level:					
Summarize other special skills and qualifications you possess which are related to the position applied for:						

Persons not related to you		
1(Name)	(Address)	(Phone Number)
,	,	,
2(Name)	(Address)	(Phone Number)
3(Name)	(Address)	(Phone Number)
consideration, or if already empleted and that if I am selected	oloyed, my employment may be terminated by the followed for employment, my employment is contact the contact that the following the followed by the followed b	ading or excluded, I may be ineligible for further ted.  ponditioned upon passing a pre-employment physical for, be conditioned upon passing a criminal
-		shift, night shift, weekends and/or be on-call and be
-	•	unction of any position I might obtain with the City of ng the operator's license required for such position.
I represent and warrant that I h	ave read and fully understand the forego	oing and seek employment under these conditions.
Signature of Applicant	Date:	

References